



State of Washington  
Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

For Ecology Use

Fee Paid

Date

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name Washington Department of Natural Resources Home Tel: (360) -  
Mailing Address P. O. Box 47016 Work Tel: (360) 902 - 1604  
City Olympia State WA Zip+4 98504+7016 FAX: (360) 902 - 1789

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

Name Pam Jenkins (Department of Corrections) Home Tel: ( ) -  
Mailing Address P.O. Box 41112 Work Tel: (360) 753-3975  
City Olympia State WA Zip+4 98504 + 1112 FAX: (360) 586-8723  
Relationship to applicant Director of Environmental Services, Dept. of Corrections

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 100 ( X gallons per minute or  
cubic feet per second) from a surface water source or X ground water source (check only one) for the purpose(s)  
of Domestic/Public Supply . ATTACH A "LEGAL" DESCRIPTION  
OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient.

See Attachment A

Estimate a maximum annual quantity to be used in acre-feet per year: 40 AF/Yr

Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:  
From / / to / /

Section 4. WATER SOURCE

If SURFACE WATER						If GROUNDWATER		
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:						A permit is desired for 1 existing well(s).		
Number of diversions:								
Source flows into (name of body of water):						Size & depth of well(s): 6-inch diameter well, 180 feet deep, 100 gpm		
LOCATION								
Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: 62 feet west and 256 feet north of the east quarter corner of Section 13								
¼ of	¼ of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
SE	NE	13	23	2W	Mason	—	—	—
For Ecology Use Date Received: 8/23/04 Priority Date: 8/23/04								
SEPA: Exempt/Not Exempt FERC License # Dept. Of Health #								
Date Accepted As Complete 8-30-04 By: SC Date Returned By: 15 WRIA: 15								

Appl. No.:

G2-30207



## Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: Formerly Mission Creek Youth Camp, renamed Mission Creek Corrections Center (MCCC)
- B. Briefly describe your proposed water system. (**See instructions.**)
- The existing water system consists of a 180-foot deep 6-inch diameter well drilled in 1960. (See Attachment B Construction Record.) Water was encountered at 140 feet below ground surface. Installed in the well is a six-stage 5.5 GH vertical turbine pumping unit with a 15 HP, three-phase, 220 volt, 3600 rpm vertical hollow shaft high thrust drip proof motor with non-reverse ratchet. The pump capacity is 100 gpm. The pump delivers water to a 30,000-gallon elevated water tower. The water from the tower services a 220,000-gallon tank (required for fire flow) and the buildings. Mission Creek Corrections Center has a backflow prevention system in place. The system will remain in place, with the additional water rights extracting groundwater from the same well. The distribution system to additional housing units will be modified.
- C. Do you already have any water rights or claims associated with this property or system? ☒ YES ☐ NO  
PROVIDE DOCUMENTATION. See Attachment C.

## Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: 155 \* Prison living units  
(Homes, Apartment, Recreational, etc.)
- \* Assumes: 40 Af/yr domestic/public supply = 35,707 gpd; City of Shelton, Mason County 1 ERU = 230 pgd; therefore 35,707/230 = 155 additional connections (NOTE concerning existing connections: Assumes existing water right of 27 AF/yr becomes domestic/public supply; 27 AF/y = 24,102 pgd/230gpd/ERU = 105 existing connections).
- B. Are you within the area of an approved water system? ☐ YES ☒ NO  
If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.

**Complete C. and D. only if the proposed water system will have fifteen or more connections.**

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☒ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.
- DOC is in the process of updating the statewide water system plan that will include this facility. Anticipated submittal to DOH is January 2005. The previous plan did not include Mission Creek because DOC did not own the facility at that time.
- D. Do you have an approved conservation plan? ☐ YES ☒ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.
- DOC does not currently have a water conservation plan for Mission Creek. The facility is not currently being utilized as a prison. This application will allow us to expand the facility from housing 80 youth (during DSHS ownership) to housing 400 inmates.

## Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Complete for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: \_\_\_\_\_
- B. List total number of acres for other specified agricultural uses:
- |           |             |
|-----------|-------------|
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
- C. Total number of acres to be covered by this application: \_\_\_\_\_
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977, as amended by Chapter 237, Laws of 2001)  
Add up the acreage in which you have a controlling interest, including only:
- ‡ Acreage irrigated under water rights acquired after December 8, 1977;
  - ‡ Acreage proposed to be irrigated under this application;
  - ‡ Acreage proposed to be irrigated under other pending application(s).



1. Is the combined acreage greater than 6000 acres? ☐ YES ☐ NO  
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO  
If yes, enter permit no: \_\_\_\_\_

E. Farm uses:  
Stockwater - Total # of animals \_\_\_\_\_ Animal type \_\_\_\_\_ (If dairy cattle, see below)  
Dairy - # Milking \_\_\_\_\_ # Non-milking \_\_\_\_\_

## Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO

*NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.*

## Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

Drive north on from Olympia toward Shelton. Turn off onto State Route 3 towards Belfair. In Belfair, turn left onto State Highway 300; continue through the stop sign. Turn right onto Sand Hill Road and proceed to sign for Mission Creek Youth Camp on left hand side of road. Turn left and follow drive up the hill.

## Section 10. REQUIRED MAP

A. Attach a map of the project. (**See instructions.**) See Attachment D.

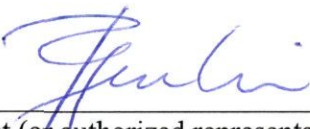
## Section 11. PROPERTY OWNERSHIP

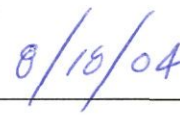
A. Does the applicant own the land on which the water will be used? ☒ YES ☐ NO  
If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

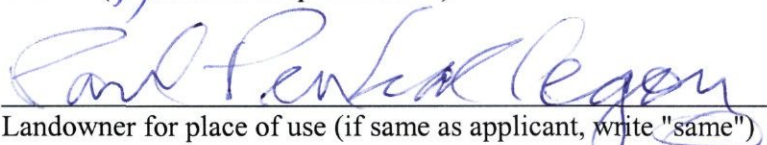
The Department of Natural Resources owns the property, which is leased to the Department of Social and Health Services (DSHS). The Department of Corrections has a Memorandum of Understanding with DSHS. The agreements with both DSHS and DNR are provided in Attachment E.

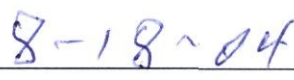
B. Does the applicant own the land on which the water source is located? ☒ YES ☐ NO  
If no, submit a copy of agreement: **See Attachment E.**

**I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.**

  
Contact (or authorized representative)

  
Date

  
Landowner for place of use (if same as applicant, write "same")

  
Date